AMENDMENTS TO THE CLAIMS

Claims 1-41 (Cancelled)

42. (Previously presented) A method of hormone replacement therapy, comprising administering to a woman in need thereof an effective amount of estrogen in combination with an effective amount of a progestin, and an amount of antiprogestin effective to ameliorate uterine bleeding problems associated with hormone replacement therapy.

43. (Previously Presented) A method of claim 42, wherein the antiprogestin is administered periodically.

44. (Previously Presented) A method of claim 42, wherein the antiprogestin is administered continuously.

Claims 45 to 55. (Cancelled)

56. (Previously presented) A method of hormone replacement therapy comprising administering to a woman in need thereof an effective amount of estrogen, with progestin administration, and an amount of antiprogestin effective to inhibit breakthrough bleeding.

57. (Previously Presented) A method of claim 56 wherein the antiprogestin is administered periodically.

- 58. (Previously Presented) A method of claim 56, wherein the antiprogestin is administered continuously.
- 59. (Previously Presented) A method of claim 57, wherein the estrogen is administered continuously.
- 60. (Previously Presented) A method of claim 58, wherein the estrogen is administered continuously.
- 61. (Previously presented) A method of hormone replacement therapy comprising administering to a woman in need thereof an effective amount of estrogen, with progestin administration, and an amount of antiprogestin equivalent to an oral dose of about 1.0 to about 10 mg/kg of weight of the woman.
- 62. (Previously Presented) A method of claim 61, wherein the antiprogestin is administered periodically.
- 63. (Previously Presented) A method of claim 61, wherein the antiprogestin is administered continuously.
- 64. (Previously Presented) A method of claim 62, wherein the estrogen is administered continuously.
- 65. (Previously Presented) A method of claim 63, wherein the estrogen is administered continuously.

66. (Previously Presented) A method of claim 61, wherein the dose is 50-500 mg.

67 - 81. (Cancelled)

82. (Previously presented) A method of avoiding the bleeding problems associated with administering to a female mammal dosage amounts of an estrogen low enough to create incidents of breakthrough bleeding and withdrawal amenorrhea during hormone replacement therapy, which comprises (a) administering the estrogen daily without interruption and (b) administering progestin and (c) periodically, at intervals of at least about a month, administering to the female an amount of an antiprogestin effective to reduce or eliminate breakthrough bleeding and, optionally, to induce sloughing of accumulated endometrial tissue and thereby induce menses.

83. (Previously Presented) A method of claim 82, wherein the estrogen and the daily dose thereof is ethinyl estradiol or an ester thereof in the amount of 5-15 mcg/day, mestranol in the amount of 20-25 mcg/day or conjugated estrogens in the amount of 5-15 mcg/day.

Claims 84 to 85. (Canceled)

86. (Previously presented) A method of claim 82, wherein the amounts of the estrogen and the progestin which are administered are effective to suppress endometrial proliferation.

87. (Previously presented) A method of claim 82, wherein the administration of the progestin is continued uninterrupted throughout the cycle.

- 88. (Previously presented) A method of claim 82, wherein the administration of progestin is interrupted proximate the day of antiprogestin administration.
- 89. (Previously presented) A method of claim 82, wherein the antiprogestin is administered about monthly.
- (Previously presented) A method of claim 82, wherein the antiprogestin is administered orally.
- (Previously presented) A method of claim 82, wherein the antiprogestin is onapristone or mifepristone.
- 92. (Previously presented) The method of claim 82, wherein the progestin is gestodene or norethindrone acetate.
- 93. (Previously presented) The method of claim 82, wherein the estrogen, the progestin and the antiprogestin are administered orally; wherein the administration of the progestin and the estrogen is continued uninterrupted throughout the cycle and wherein the estrogen and the daily dose thereof is ethinyl estradiol or estradiol or an ester thereof in the amount of 5-15 mcg/day, mestranol in the amount of 20-25 mcg/day or conjugated estrogens in the amount of 5-15 mcg/day.
- 94. (Previously presented) The method of claim 82, wherein the female is a para- or postmenopausal woman.

- (Previously Presented) The method of claim 94, wherein the estrogen is administered in combination with a progestin.
- 96. (Previously Presented) The method of claim 95, wherein the administration of the progestin is continued uninterrupted during the period of antiprogestin administration.
- 97. (Previously Presented) The method of claim 95, wherein the administration of the progestin is interrupted proximate the period of antiprogestin administration.
- (Previously Presented) The method of claim 94, wherein the antiprogestin is onapristone or mifepristone.
- 99. (Previously Presented) The method of claim 94, wherein the estrogen and the daily dose thereof is ethinyl estradiol or estradiol or an ester thereof in the amount of 5-15 mcg/day, mestranol in the amount of 20-25 mcg/day or conjugated estrogens in the amount of 5-15 mcg/day.
- 100. (Previously Presented) The method of claim 95, wherein the antiprogestin is onapristone or mifepristone; and wherein the progestin is gestodene or norethindrone acetate.
- 101. (Previously Presented) The method of claim 95, wherein the estrogen, progestin and antiprogestin are administered orally; wherein the antiprogestin is administered at longer than one month intervals; wherein the administration of the progestin is continued uninterrupted during the period of antiprogestin administration; and wherein the estrogen

and the daily dose thereof is ethinyl estradiol or estradiol or an ester thereof in the amount of 5-15 mcg/day, mestranol in the amount of 20-25 mcg/day or conjugated estrogens in the amount of 5-15 mcg/day.

102 - 115. (Canceled)

116. (Currently amended) The method of claim <u>82</u> 108, wherein the estrogen is ethinyl estradial

117 - 119. (Canceled)

120. (Currently amended) The method of claim 94 + 119, wherein the antiprogestin is administered at longer than monthly intervals.

121. (Currently amended) The method of claim 94 108, wherein the administration of the progestin and estrogen is continued uninterrupted throughout the cycle, including during menses.

122. (Previously presented) The method of claim 121, wherein the administration of the progestin is interrupted proximate the day of the antiprogestin administration.

123. (Currently amended) The method of claim <u>94 119</u>, wherein the antiprogestin is administered orally.

124. (Currently amended) The method of claim $\underline{94}$ 119, wherein the antiprogestin is mifepristone.

125. (Currently amended) The method of claim 94 119, wherein the estrogen is ethinyl estradiol or estradiol.

126. (Currently amended) The method of claim 94 119, wherein the progestin is norethindrone acetate.

127 - 134. (Canceled)